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INDIGENT WHO NEED THEIR PROVISIONS.

ANNUAL ADDRESS

IN

MENTAL DISORDERS.

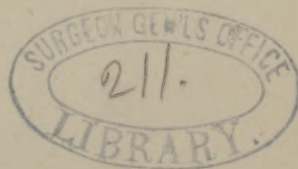
Read before the State Medical Society, at Lancaster, May 12, 1881.

BY

S. S. SCHULTZ, A.M., M.D.,

SUPERINTENDENT STATE HOSPITAL FOR THE INSANE, DANVILLE, PA.

EXTRACTED FROM THE TRANSACTIONS OF THE MEDICAL SOCIETY OF THE STATE
OF PENNSYLVANIA FOR 1881.



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ADDRESS IN MENTAL DISORDERS.

No doubt one of the chief purposes of these annual addresses on various branches of the science and art of medicine, should be to present a concise history of the progress that had been made during the year, accompanied with such critical remarks as may suggest themselves, as to the real value of what has been gained. It is thus that the fruit of special studies for the year or a lifetime of one, may become the possession of the many who cannot in the nature of things devote the same attention to many subjects. While I believe this to be the rule, there are occasions when the proper objects of all medical science, the prevention and cure of disease, and the alleviation of the misery resulting from it, can be better secured by taking another course. I shall therefore at once present a few thoughts relating to the care of the insane, on which I cannot but feel that public sentiment is in danger of going astray, innocently becoming the occasion of injury to a most righteous cause.

Insanity is universally looked upon as such a serious calamity, as to entitle the victim of it and his family or dependents to a greater amount of sympathy and aid than are accorded to the sufferer from a disease whose symptoms are chiefly bodily. The clear mind and absence of delirium are always a great mitigation of the severest illness, and no one can look with composure upon the opposite condition, in the mildest ailment, until long familiarity has hardened him to it. The reason for this is easily found; man is what he is because he is endowed with mind, what pre-eminence he has over the brute he owes to those faculties whose operation is suspended or destroyed by insanity. No other affliction or loss can equal that which, so to speak, degrades him in the scale of being, denaturalizes him, and makes him in many respects not only equal, but often even inferior to the animal creation. We are shocked by the sight of such a transformation, and when the race had once lifted itself out of the not unnatural supposition that such an effect could be produced only by a direct judicial infliction by the Supreme

Judge, of unusual punishment for aggravated crimes, then the feelings of pity and sympathy begin to displace those of satisfaction at outraged law being vindicated.

The gravity of the disease is greatly enhanced by the fact that it often exists in its early and undeveloped stages, misunderstood for months and years, and that during this time the capacity to take care of property, to manage business, and to provide for the family are greatly impaired, and hitherto unknown want and suffering are experienced, and this all the result of disease before its existence is known or measures taken for its cure. Foolish enterprises, visionary schemes, unreasonable expectations which were never thought of or entertained before, and whose true character is seen only by the lurid light of subsequent events, waste the scanty supplies of the humble home, before the true character of the struggle is recognized.

Another feature is the transformation of the moral character of the victim of this disease. It turns love into hatred, truthfulness into falsehood, confidence and trust into suspicion, tenderness and affection into harshness and abuse. In aggravated cases it brings him into collision with the officers of the law, whose penalties, adjudged under solemn forms, but none the less unrighteously, are visited upon him. If he had remained well he would have continued to be a respected useful neighbor, a patriotic citizen, a faithful husband, a kind indulgent father, and an honest truthful man; but he became sick, as all are liable to become sick, and on this account alone, so far as he is responsible, his name becomes a by-word, and his memory is handed down as a warning to evil-doers. Of course such cases are not as frequent as they used to be, but we cannot yet, unfortunately, cast all their reproach upon our forefathers, or upon half-civilized nations, or upon other countries.

Those diseases which lie at the foundation of insanity, as a class, are slow in their development and subsidence, when compared with those which are less intimately connected with the central nervous system, and whose symptoms are chiefly bodily. It is therefore characteristically a chronic disease, and the burdens which it imposes upon individuals, families, and neighbors, might be borne more often successfully, were it not that they have to be borne so long. The course of the more usual disease is so short that the difficulties arising from the loss of time and money may often be tidied over with or without such help as is accessible to all.

No one, of course, needs to be informed that insanity makes its appearance in persons in whose antecedent history or relationships no trait could be found to justify the expectation of such an event.

It comes out of a clear sky. But much more often, and more frequently than in other diseases, there is at its foundation an hereditary taint whose baleful influence casts its shadow with varying intensity over other members of the family. Were only one ill, and all the others of the family whole, the battle would be more even handed; but when those who should assist are themselves on the side of the enemy, we need not wonder that the day is so often closed in gloom and darkness, and the first victim carries all down with him, in one common wreck of poverty and helplessness.

One of the most painful incidents, that occur in the course of the disease, is the frequent necessity that the patient should be separated from near relatives and acquaintances and placed among strangers. This does not occur alone or chiefly because needful appliances may be more readily secured in a hospital, for wealth may command these in any place. Nor when the superiority of hospital treatment is insisted upon is it placed on the pretended ground that there alone can be obtained the requisite medical skill. This man of straw is sometimes set up, but the arrogant assumption has never been made or entertained. The reason of it is that the nature of the disease is such, that the mere presence of the husband or wife, brother or sister, business partner or neighbor, becomes an irritant, which neutralizes the best contrived plan of treatment. Even the ill-advised visit to the patient of a person bearing such a relation to him, however sincere and ardent the affection which prompts it, may undo in an hour what has been gained in a month. Hence, it is often the first and most imperative step, without which every other is but a retrograde movement, that the invalid should be removed from familiar scenes and faces, and placed among those which have been hitherto unknown. This often becomes the severest trial.

We have then the following accumulation of characteristics peculiar to this disease, to which in a great measure it owes its serious nature:—

The loss of mind, and consequent loss of control of self, of property, and business.

Its frequent existence for a long period in an undeveloped and unrecognized form; working mischief in the dark.

Its alteration of the moral character and its effect, the violation of law and resulting punishment.

Its very slow course.

Its affecting in varying degrees several members of the same family.

The requirement for its successful treatment of separation from friends and removal from home. And yet these are only the external phenomena which present themselves to the observer and are

as nothing compared with the extent and variety of the mental torture experienced by the unfortunate victim of the scourge. None can express and he alone can realize the keenness of that anguish which seeks relief in self-destruction or the blood of those most dear and cherished.

We need not wonder then that from such a combination of misfortunes, most of which are usually indicated by the word insanity, there should spring discouragement, sooner or later despair, and ultimately, to those in moderate circumstances, irretrievable financial ruin. It was remarked of old that the noblest spectacle was presented by an honest man, struggling with adversity; it might be added that the most pitiable is the gradual dispersion by the invasion of mental disease of the fruits of honest industry and thrift, practised for years by the members of a family. With the strength for execution of the adult, but discretion not that of a child, one need not look far for an explanation of the fact that dependence and the poor-house are so often, if left to his own resources, sure to follow in the wake of his disease and not far in its rear. It is hence that, in half-civilized states even, efforts are made to assist the insane by public charity, so that they may have not only proper chances for restoration, but be protected from themselves and others, and their families and dependents as well as the public secured from harm.

The claim which such helplessness has on the public for succor is now universally acknowledged, and the insane are looked upon as the wards of the State, and in this as in other spheres of benevolent labor the expenditures made from humane impulses have proved to be not always or simply sacrifices. For it has been often maintained, and supported by abundant proof, that many of those who become insane in early life, and who through the want of timely and suitable care remain hopeless invalids, necessarily supported at the public expense, would under more favorable conditions be restored, and, instead of being consumers, become producers of public wealth.

It has been by the presentation to the public and to the Legislature of such views, amplified, illustrated, and enforced by argument and the recital of the needless hardships and brutal treatment endured by the unfortunate victims of this disease, that legislation has been obtained establishing State hospitals for the insane. This society, acting through committees appointed for the purpose, has been largely instrumental in this good work. It may be stated in round numbers that in the five so-called State hospitals there is room for three thousand patients, and that of this accommodation only two-thirds is in use, or that one thousand beds are vacant. The in-

ference has been somewhat hastily drawn from this, that too many hospitals have been built, and that the money put into them has been squandered. I propose to state some reasons which I think prove that this opinion is not well founded. The fact that there are unoccupied beds may be, and no doubt is true, but it does not at all follow that there are too many beds, for those who should occupy them may be improperly deprived of them, or there may not have been time for them to find their way into them. Three of the five hospitals have been so recently completed that it is not certain how long they might be partially vacant, even under the existing laws controlling the admission of patients. Thus, when the Norristown Hospital was opened, it was thought that it might be a long time before all its ample halls should be filled, but it may already be said to be rapidly approaching a crowded condition, and all this in ten short months. While such a rapid filling-up cannot be looked for in the other two new institutions, the course of things in this one has in a general way been the history in the past of every State institution in the land, and may be confidently predicted as the future of every new one. From one you tell all. It is, therefore, by no means certain, because beds are not used to-day that they will not be in demand to-morrow.

But if it were probable, or even certain, that these beds should never be filled in the present order of things, it would still be far from conclusive that the building of hospitals had been overdone.

It would seem at first sight very easy to ascertain the number of the insane in a community or a State, but in reality to obtain statistics on this subject of sufficient accuracy to make them altogether reliable, is a very difficult if not impossible task. While the returns are not yet available of the last census, in which extraordinary pains were taken to avoid errors, we may use other methods to come to an approximation to the truth, as to the number of the insane in this State. By a most careful and painstaking investigation of this kind, whose results have often been quoted as the most accurate that had ever been obtained in any country, it was ascertained in 1855 that in Massachusetts there was one insane person, not including idiots or imbeciles, to every four hundred and twenty-seven of the entire population. If this ratio existed here, there would be ten thousand insane in the State of Pennsylvania, while it would be difficult to assign any reason why the proportion should be lower in this State than elsewhere. Let me in order to avoid all risk of exaggeration assume that there is one insane person to every seven hundred of the general population, and still with our four

and one-quarter millions inhabitants there would be six thousand of this class. In the nature of things a very small number of these can receive hospital care at all unless they receive it in institutions erected and in a great measure maintained by the State; with the most liberal allowance for those who may not need hospital treatment or who may be able to get it outside of State hospitals, there will still be many left out of this six thousand for whom there is no provision in the three thousand beds already established.

If it be held that the usual provision for the insane poor, outside of the State hospitals, is all that is required, there is abundant testimony to the contrary.

First, in the following statement made 35 years ago by a person of unequalled extent of observation and most competent judgment in such matters; a statement which, with its accompanying proofs and illustrations, laid before the Legislature, was very influential in the establishment of our first hospital. It runs thus: "I have endeavored to show you, *first*, that the provision for the poor and indigent insane of your State is inappropriate, insufficient, and unworthy of a civilized and Christian people; *second*, that it is *unjust* and *unjustifiable* to convict as criminals and incarcerate those in prison who, bereft of reason, are incapable of that self-direction and action by which a man is made responsible for the deeds he may commit; *third*, I have in the description of your almshouses, adding the opinion of the most intelligent men in the State, shown that these are in all essential respects unfit for the insane, and that while they may with uncommon care and devotedness on the part of the superintendent and other official persons be made decent *receptacles*, they cannot be made curative hospitals nor asylums for affording adequate protection for the insane; *fourth*, still less can these ends be accomplished in private families, even where pecuniary prosperity affords the means of supplying many wants. But in those where this calamitous malady is united with poverty and pinching want, it is barely within the bounds of probability that the patient should recover." Of course, time has wrought many improvements, but it is to be feared that even at the present time, not a few originals might be found within the limits of our own State, which would serve for pictures in no respect to be distinguished from those there presented.

In the next place, there is proof to the contrary in the purpose and practice of every State in the Union, whose aim is uniformly to bring their insane poor into hospitals, under State supervision and control. Whatever the special method established by law, this is

the end aimed at. Sentiment alone, without the right and reasonableness of the measure, would not secure in so many States and for so long a time a series of enactments which have for their end the removal of the insane poor from poor-houses and jails into hospitals.

Then the recent testimony of the State Board of Charities, one of whose functions is "to visit, look into, and examine" charitable institutions, has an official value, in addition to that which belongs to it as the opinion of representative men from all parts of the State, who have had and who have used unusual opportunities of observation. This is to the effect "that even the best county asylums afford insufficient safeguards for the insane, and that a present fair standard of care cannot be relied on, in view of the changes in economy and supervision liable to occur under different administrations."

In the sixth Annual Convention of the Association of the Directors of the Poor of this State, held at Harrisburg in September of last year, this resolution was endorsed by an almost two-thirds vote. No individuals can have better acquaintance with the masters here referred to, or be, as public officers, more responsible for a judicious and humane treatment of the question, than the members of this convention. They who are called to administer the system can, better than others, speak with authority as to its character. This then is the last point to be referred to as proving that the provision for the insane poor outside of State hospitals is not adequate or suitable.

We have now come to that stage in this discussion, at which the question naturally arises, Why are not the provision for the insane which exists in the empty bed, and the patient who suffers for the want of it, brought together? Why are not the indigent insane, for whom at all hands it is acknowledged that the State is bound to provide, allowed to enjoy the accommodation which it has already made for them?

The daily experience of every hospital readily solves this problem. For the maintenance of those supported at the public expense the law fixes the charge at three dollars per week, which is ordinarily increased from thirty to forty cents for clothing and other incidentals. Many poor districts, both large and small, soon find this such a burden, that the taxpayers compel the officers to throw it off, and the patient, from motives of economy, is removed from the hospital. If he is supported by himself or his friends, to which step, necessity on account of not receiving public aid, or a sense of independence

and of honorable pride, often drives those in very moderate circumstances, the same motives lead to the same result, and the unfortunate victim of the most distressing disease is deprived of treatment such as he requires. It does not meet the case to say that the expense *should* be borne; if it *is* not, the effect to the patient is the same whether the necessity is real or pretended; and concerning its reality there are usually too many evidences to leave room for doubt. It is for this reason then that the hospitals are not filled, *the State charges more for the accommodation which it owns and controls than can be paid for those who need it.* In view of this condition of things, instead of nursing our pride in what has been accomplished for the helpless, we should rather cultivate humility, because the work has not been carried far enough to make it effective; instead of looking into the past with complacency and resting, the State should look into the future with resolution, and gird its loins for what remains to be done.

Now, what this is which remains to be done, may be readily learned from not a few of our sister States. Thus, instead of paying a little more than one-fifth of the maintenance of a patient in the hospital, as is done by the State of Pennsylvania, and leaving nearly four-fifths to be paid by the poor authorities, in Connecticut one-half of this expense is defrayed out of the State treasury, and the other half by the townships. In Ohio the entire cost is met by State appropriations. I refer to these two by way of example.

It would be a mockery to invite a starving beggar to a well spread table, and then give him access to it only on complying with an impossible condition. That man would hardly be counted charitable who should clothe the naked and feed the hungry, provided they repaid him four-fifths of what he spent upon them, but turned others no less destitute away from his door, unclothed and unfed, because they could repay only three-fifths or nothing at all. Can that institution be called charitable, which in a like manner discriminates in favor of the less needy and the less helpless, and against those especially needing its aid and for whose particular benefit it professes to have been established? If the insane poor are the wards of the State, as has been declared by high judicial authority, how is that State taking care of its wards, which makes by law their very extremity of want a bar to the dispensation to them of its so-called benevolence? Does not every argument which has been employed, and justly employed, for fifty years in favor of the establishment of such institutions, also just as conclusively tend to prove that in some way provision must be made which certainly

secures their benefit to the most needy in the poorest poor district in the State?

Have not the members of this Society and the Society itself, whose record has been so honorable in promoting legislation most fruitful of good in this field, some duty to perform that would complete its work and be commensurate with its powers and opportunities?





